DLN: 93493122009314

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		ADAM	MEYERSON PRESIDENT or print name and title						
			ture of officer				ite		
	T i	****					14-04-29		
	wledg	e and b		omplete Declaration of preparer (oth					
Part Under n			ature Block	examined this return, including accor	mnanur	a schodula	c and c+	atement	s and to the heat of
				ct line 21 from line 20	. [10,647	,073	10,527,485
글 및 2 프로					⊢		285,		293,945
3 H 2							10,932		10,821,430
Not Assets or Fund Balances						Beginning Y	j of Curre ear	ent	End of Year
-	L9	Reveni	ue less expenses Subtract lir	ne 18 from line 12	<u> </u>		740,		-677,067
1	L 8	Total e	xpenses Add lines 13-17 (r	nust equal Part IX, column (A), line 2	25)		6,109,	817	6,419,839
	L 7	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	[2,648,	.537	2,784,381
<u> </u>			ndraising expenses (Part IX, column		[
EX) enses	L6a	5-10) Profess	sional fundraising fees (Part I	X, column (A), line 11e)			3,211,	.280	3,385,458
1				byee benefits (Part IX, column (A), li					
				t IX, column (A), line 4)				0	0
1				nt IX, column (A), lines 1–3)			250,		250,000
1				11 (must equal Part VIII, column (A			6,850,	567	5,742,772
å 1				A), lines 5, 6d, 8c, 9c, 10c, and 11e)				471	7,925
듄				mn (A), lines 3, 4, and 7d)	-		240,		215,061
			- · · · · · · · · · · · · · · · · · · ·	, line 1 h)	—		6,211, 386,		5,105,665 414,121
		C		lima 1 h)	-	Prio	r Year	221	Current Year
	b Ne	et unrel	ated business taxable incom	e from Form 990-T, line 34	<u> </u>			7b	C
	7a T d	otal unr	elated business revenue from	Part VIII, column (C), line 12 .				7a	18,325
₽	6 To	otal nur	nber of volunteers (estimate i	fnecessary)				6	249
=			· -	ın calendar year 2013 (Part V, line 2	-			5	40
<u>≅</u>				rs of the governing body (Part VI, line				4	8
	3 Nu	umber (of voting members of the gove	erning body (Part VI, line 1a)				з	8
- Se	2 CI	heck th	ıs box দ ıf the organization	discontinued its operations or dispo	sed of m	nore than 2	5% of its	net as:	sets
Governance	_								
	T	O ASSI	ST DONORS IN ACHIEVING	G THEIR PHILANTHROPIC INTENT SPONSIBILITY IN AMERICA AND			ONORS	ADVAN	CE LIBERTY,
Part			mary escribe the organization's mis	sion or most significant activities					
			Corporation Trust Associa	otion Other ►		L Year of for	mation 1	978 M	State of legal domicile DC
J Web	site:	► ww	W PHILANTHRO PYRO UNDT	ABLE ORG	+	H(c) Grou	p exemp	tion nun	nber ►
I Tax-∈	exemp	t status	▼ 501(c)(3)	¶ (insert no)				n a list	(see instructions)
			WASHINGTON, DC 2003	30		H(b) Are a includ		ınates	Γ Y es Γ No
			1730 M STREET NW NO			subor	dinates?		┌ Yes ┌ No
			F Name and address of p	rincipal officer	ŀ	i(a) Is thu			
Applica	ation p	pending	WASHINGTON, DC 20036				G Gross	receipts \$	5,742,772
, Γe ΓAmenα		turn	City or town, state or province, o	ountry, and ZIP or foreign postal code			(202	822-8	333
			Number and street (or P O box 1 1730 M STREET NW NO 601	f mail is not delivered to street address) Roo	om/suite		E Teleph	one numl	per
	e chang	je	Doing Business As						
┌ Inıtıal		rige		E			13-2	943020)
Address Name Initial	ss char	ngo		-					

May the IRS discuss this return with the preparer shown above? (see instructions) $\ \ .$

✓ Yes ☐ No

0111	F a(J C 4
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission	
ГНЕ	FOSTER EXCELLENCE IN PHILANTHROPY, TO PROTECT PHILANTHROPIC FREEDOM, TO ASSIST DONORS IN ACHIEVING IR PHILANTHROPIC INTENT, AND TO HELP DONORS ADVANCE LIBERTY, OPPORTUNITY AND PERSONAL RESPONSIBILITY RICA AND ABROAD	IN
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 945,578 including grants of \$) (Revenue \$ 392,965)	
	ANNUAL MEETING TO FOSTER EXCELLENCE IN PHILANTHROPY THROUGH AN ANNUAL MEETING OF FOUNDATION EXECUTIVES AND INDIVIDUAL PHILANTHROPIST ORDER TO SHARE IDEAS, STRATEGIES, AND BEST PRACTICES IN 2013, 400 ATTENDES ATTENDED THE ANNUAL MEETING PARTICIPATING IN 26 SESSIONS ON VARIOUS TOPICS TO BECOME MORE EFFECTIVE PHILANTHROPISTS	S II
4b	(Code) (Expenses \$ 1,777,037 including grants of \$ 250,000) (Revenue \$)	_
	BREAKTHROUGH GROUP MEETINGS AND SERVICES TO PROVIDE A FORUM FOR DONORS TO DISCUSS BREAKTHROUGH INITIATIVES IN K-12 EDUCATION, AND ECONOMIC OPPORTUNITY, SIMON PRIZE AND OTHER PROGRAM AREAS OVER 650 DONORS ATTENDED OUR PUBLIC MEETINGS	
4c	(Code) (Expenses \$ 1,092,483 including grants of \$) (Revenue \$)	
	ALLIANCE FOR CHARITABLE REFORM THE ALLIANCE FOR CHARITABLE REFORM IS A PROJECT OF THE PHILANTHROPY ROUNDTABLE ITS MISSION IS TO PROMO THE RIGHTS OF DONORS AND PRIVATE FOUNDATIONS TO CHOOSE HOW AND WHERE TO SPEND THEIR CHARITABLE ASSETS AND TO DEFEND AGAINST ANY INITIATIVE THAT SEEKS TO USE THE LEGISLATIVE OR POLITICAL PROCESS TO WEAKEN THAT RIGHT TO CHOOSE	ΤE
	(Code) (Expenses \$ 601,333 including grants of \$) (Revenue \$)	
	PHILANTHROPY MAGAZINE AND WEBSITE TO PRODUCE A MAGAZINE WHICH FOCUSES ON BROAD STRATEGIC QUESTIONS OF PHILANTHROPIC GIVING AND IS DISTRIBUTED TO MORE THAN 6,000 INDIVIDUALS	
	(Code) (Expenses \$ 478,837 including grants of \$) (Revenue \$ 2,831)	
	OTHER PUBLICATIONS TO PROVIDE PUBLICATIONS THAT ARE ON TOPICS OF INTEREST WITHIN THE PHILANTHROPIC COMMUNITY THEY HELP DONORS ACHIEV PHILANTHROPIC EXCELLENCE, INCLUDING IN-DEPTH EXAMINATION OF THE PRINCIPLES AND PRACTICAL ASPECTS OF INTELLIGENT CHARITABLE GIVING GUIDEBOOKS WERE COMMISSIONED FOR PUBLIC POLICY, DIGITAL LEARNING, CLOSING THE HIGH ACHIEVEMENT GAP, TEACHER AND PRINCIPAL EXCELLENCE, CHARTER SCHOOLS, CATHOLIC SCHOOLS, AND AMERICAN PHILANTHROPY	E
	(Code) (Expenses \$ 580,286 including grants of \$) (Revenue \$) PHILANTHROPIC RELATIONS TO PROVIDE ONE-ON-ONE CONSULTATION OF GOVERNANCE ISSUES AND BEST PRACTICES IN CHARITABLE GIVING	
4d	Other program services (Describe in Schedule O) (Expenses \$ 1,660,456 including grants of \$) (Revenue \$ 2,831)	
4e	Total program service expenses ► 5,475,554	
		_

Part IV	Checklist o	of Required	Schedules
---------	-------------	-------------	------------------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Νo
31	Part I	31		No
32	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 62			
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N o
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from members or shareholders			
_	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand	 		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a re	sponse or note to an	v line in this Part VI	 _	_	_	_	_	_	_	_	_		Ţ
Check is Selfcadic o contains a r	sponse of note to an	, illic ill cilis i alc vi											

Se	ection A. Governing Body and Management						
				_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		8			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		8			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			any •	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			. [3		Νo
4	Did the organization make any significant changes to its governing documents since filed?	the p	rıor Form 990 was		4	Yes	
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation's assets? .		5		No
6	Did the organization have members or stockholders?			. [6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?				7a		Νo
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			ders,	7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ui	ndertaken during th	ne			
а	The governing body?				8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			[8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			at the	9		No
				•	- 1		
Se	ection B. Policies (This Section B requests information about policies not			nal Re	evenu	ıe Cod	e.)
Se				nal Re	evenu	ue Cod Yes	e.) No
		requi		nal Re	evenu 10a		
10a	ection B. Policies (This Section B requests information about policies not a	requi	red by the Interd 				No
10a b	Did the organization have local chapters, branches, or affiliates?	requi	red by the Interd 	, [10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it	requi	s of such chapters, xempt purposes? erning body before	, [10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	requi	s of such chapters, xempt purposes? erning body before	, [10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	requi	s of such chapters, xempt purposes? erning body before	filing	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	requi	s of such chapters, xempt purposes? erning body before	filing • • • •	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	civitie on's es gov	s of such chapters, xempt purposes? erning body before	filing ve cribe	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before	filing ve cribe	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	requi	red by the Interdiscontinuous freed by the Interdiscontinuous	filing ve cribe	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	required in the property of th	s of such chapters, xempt purposes? erning body before	filing ve cribe	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	required in the property of th	s of such chapters, xempt purposes? erning body before	filing ve cribe	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	required in the property of th	s of such chapters, xempt purposes? erning body before	filing ve cribe	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before	filing ve cribe ion?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	required in the presume and a step presume a step p	s of such chapters, xempt purposes? erning body before	filing ve cribe ion?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No No

- List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ►THE PHILANTHROPY ROUNDTABLE 1730 M STREET NW SUITE 601
 WASHINGTON,DC 20036 (202)822-8333

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ♦ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below	more pers and	than on is a dii	one bot	not box h ar or/tr	offic	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee				organizations
(1) MIKE GREBE	3 00	x		×				0	0	0
CHAIRMAN										_
(2) JAMES PIERESON	1 00	x		l _x				0	0	0
VICE-CHAIRMAN										0
(3) JOHN TYLER	1 00	,,		,,						
SECRETARY		Х		X				0	0	0
(4) DONN WEINBERG	2 00									
TREASURER		Х		Х				0	0	0
(5) ANA THOMPSON	1 00									
BOARD MEMBER		Х						0	0	0
(6) JEFF SANDEFER	1 00			\vdash			\vdash			
		х						0	0	0
BOARD MEMBER (7) DANIEL S PETERS	1 00			\vdash			\vdash			
		х						0	0	0
BOARD MEMBER (8) HEATHER HIGGINS	1.00									
	1 00	х						0	0	0
BOARD MEMBER	10.00	<u> </u>		<u> </u>			_			
(9) ADAM MEYERSON	40 00			х				267,000	0	60,269
PRESIDENT										<u> </u>
(10) JOHN PAUL DE GANCE	40 00				x			178,231	0	17,648
CHIEF OPERATING OFFICER					Ľ			1.5,231	Ű	1.,510
(11) KARL ZINSMEISTER	40 00				Х			225,000	0	49,750
VICE PRESIDENT OF PUBLICATIONS				L	Ĺ			223,000		49,730
(12) JOANNE FLORINO	40 00							464.460		10.200
SENIOR VICE PRESIDENT OF PUBLIC POLICY					X			161,163	0	10,298
(13) JO KWONG	40 00									
DIRECTOR OF ECONOMIC OPPORTUNITY						X		121,500	0	38,969
(14) SUZANNE MARCHENA	40 00									
DIRECTOR OF FINANCE & HUMAN RESOURCES						Х		108,400	0	35,006
DINECTOR OF FINANCE & HOPAN RESOURCES	⊣			\vdash			\vdash			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t perso and	n is	one l both	oox, an c		3	(E Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (W	/-	(F) Estima imount o compens from t	ted f other ation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-M15C)	2/1099-MISC		rganizati relate organiza	ed
1b	Sub-Total			•	-	<u> </u>		 						
C	Total from continuation sheet	•			•	•	•	•		1,061,294		0		211,940
2	Total number of individuals (in	_	lımıted	to the	ose	ıste	d abov	e) w	ho receive			<u> </u>		211,510
	\$100,000 of reportable compe	ensation from th	e organ	ızatı	on ⊫ €								_	
3	Did the organization list any f e	ormer officer, dii	ector o	r trus	itee,	key	emplo	yee	, or highes	t compen	sated employee		Yes	No
	on line 1a? <i>If "Yes," complete S</i> For any individual listed on line					•		•				3		No
4	organization and related organ											ا م	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
5	Did any person listed on line 1											4	Yes	
	services rendered to the organ	nızatıon? <i>If "Ye</i> s	," compi	lete S	ched	ule J	for su	ch p	erson .			5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax year	
	N	(A) lame and business	address								(B) cription of services		(C Comper	
URBA	N SWIRSKI & ASSOCIATES 1455 PENN	AVE NW SUITE 400	WASHIN	GTON	DC 20	0004				LEGISLATIV FOR FEDE	E CONSULTING SERV	ICES		422,100
2	Total number of independent co	ntractors (inclu	ding but	t not	lımıt	ed to	those	e list	ted above)	who rece	ived more than			

\$100,000 of compensation from the organization 1-1

Рагт у	****	Check if Schedule O contain		se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
के हे	1a	Federated campaigns .	. 1a					
ran	b	Membership dues	1b					
اَجِ ق	c	Fundraising events	1c					
iffs ar /	d	Related organizations .	1d					
9,∺	e	Government grants (contributions	s) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gran similar amounts not included abo	its, and 1f	5,105,665				
들돌	g	Noncash contributions included in	lines	j	į	į		
Cont	_h	1a-1f \$ Total. Add lines 1a-1f .			5,105,665			
<u>ਹ ਜ਼</u>		Total. Add filles 14-11 .	· · · ·	· · · · ►	3,103,003			
e	_			Business Code				
ven	2a .	REGISTRATION FEES		541900	392,965	392,965		
Program Serwde Revenue	b	ADVERTISING		541800	18,325		18,325	
Z Z	c	PUBLICATION SALES		900099	2,831	2,831		
ď	d							
Ē	e							
Ď	f	All other program service r	evenue					
<u>~</u>	g	Total. Add lines 2a-2f .		🕨	414,121			
	3	Investment income (includ			215,061			215,061
	4	and other similar amounts) Income from investment of tax-e		F	213,001			
	5	Royalties						
		(ı) Re		(II) Personal				
	6a	Gross rents (1) 10	41	(ii) i cissiidi				
	ь	Less rental						
	_c	expenses Rental income						
		or (loss)						
	d	Net rental income or (loss)						
	70	(1) Secul	rities	(II) O ther				
	7a	from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
		sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)	_	· · · · •				
Φ	oa	Gross income from fundrais events (not including	sing					
Other Revenue		\$						
ě		of contributions reported of See Part IV, line 18						
ά		See raiciv, inic 10 1	a					
<u> </u>	ь	Less direct expenses .	ь					
ŏ	c	Net income or (loss) from f		events 🛌				
	9a	Gross income from gaming						
		See Part IV, line 19						
	_	Local divost super	a b					
	b	Less direct expenses . Net income or (loss) from g		vities -				
		Gross sales of inventory, le	-					
		returns and allowances						
			a					
	b	Less cost of goods sold	L					
	C	Net income or (loss) from s	ales of inve					
		Miscellaneous Revenue		Business Code	7.00-			3.00=
	11a	MISC INCOME		541900	7,925			7,925
	b							
	C							
	d	All other revenue	L					
	e	Total. Add lines 11a-11d		▶	7,925			
	12	Total revenue. See Instruc	tions			395,796	10 325	222.006
	J				5,742,772	393,/96	18,325	222,986

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) .V Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 250,000 250,000 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 964,142 830,122 84,537 49,483 key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 1,766,299 1,389,813 209,133 167,353 Pension plan accruals and contributions (include section 401(k) 162,818 121,684 19,721 and 403(b) employer contributions) 21,413 315,644 Other employee benefits 252,708 35,396 27,540 10 176,555 142,741 19,190 14,624 11 Fees for services (non-employees) Management 2,728 2,728 Legal Accounting 19,845 19,845 Lobbying 262,800 262,800 Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 649,895 571,967 77,928 Schedule O) Advertising and promotion . . 12 37,329 37,329 13 Office expenses 410,274 260,918 64,432 84,924 30,533 18,877 11,656 14 Information technology . . . 15 Royalties . 365,348 365,348 16 Occupancy **17** 289,228 284,054 1,854 3,320 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 572,500 561,518 10,874 108 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization 1,147 1,147 23 17,249 17,249 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a STIPENDS AND HONORARIA 54,138 53,138 1,000 DUES AND SUBSCRIPTIONS 29,638 22,142 828 6,668 OTHER EXPENSES 28,790 5,305 23,485 d TAXES 12,939 12,939 -450,975 e All other expenses 410,438 40,537 Total functional expenses. Add lines 1 through 24e 25 6,419,839 5,475,554 527,315 416,970 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► T if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Fai	τX	Check if Schedule O contains a response or note to any line in the	ıs Part	x		-	
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			84,679	1	672,468
	2	Savings and temporary cash investments		•	2,373,271	2	1,763,987
	3	Pledges and grants receivable, net			1,968,800	3	1,039,500
	4	Accounts receivable, net			4,126	4	6,935
	5	Loans and other receivables from current and former officers, disemployees, and highest compensated employees Complete Par Schedule L	t II of			5	
Assets	6	Loans and other receivables from other disqualified persons (as section $4958(f)(1)$), persons described in section $4958(c)(3)(8)$ employers and sponsoring organizations of section $501(c)(9)$ vobeneficiary organizations (see instructions) Complete Part II of), and o	contributing y employees'		6	
82	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			54.973	9	110,545
	10a	Land, buildings, and equipment cost or other basis Complete	 	 I	04,070	9	110,040
		Part VI of Schedule D	10a	12,663			
	b	Less accumulated depreciation	10b	4,232	887	10 c	8,431
	11	Investments—publicly traded securities			6,422,233	11	7,191,198
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			23,842	15	28,366
	16	Total assets. Add lines 1 through 15 (must equal line 34)			10,932,811	16	10,821,430
	17	Accounts payable and accrued expenses			217,183	17	233,070
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	_
Ø	21	Escrow or custodial account liability Complete Part IV of Scheo	dule D			21	
Liabilitie	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi		tees,			
æ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part					
		D			68,555	25	60,875
	26	Total liabilities. Add lines 17 through 25			285,738	26	293,945
ě		Organizations that follow SFAS 117 (ASC 958), check here ► □ lines 27 through 29, and lines 33 and 34.	and c	omplete			
ğ	27	Unrestricted net assets			7,828,279	27	8,837,373
<u></u>	28	Temporarily restricted net assets			2,818,794	28	1,690,112
Ę	29	Permanently restricted net assets				29	
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he					
ō	30	complete lines 30 through 34.				20	
ets St	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Ą.	32	Retained earnings, endowment, accumulated income, or other fu			10.647.070	32	10 507 405
Ř	33	Total net assets or fund balances			10,647,073	33	10,527,485
	34	Total liabilities and net assets/fund balances		•	10,932,811	34	10,821,430

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,7	742,772
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,4	119,839
3	Revenue less expenses Subtract line 2 from line 1	3			577,067
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			547,073
5	Net unrealized gains (losses) on investments	5			57,479
6	Donated services and use of facilities	6			,,,,,,
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		10.!	527,485
Par	t XII Financial Statements and Reporting				•
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493122009314

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public **Inspection**

Name of the organization THE PHILANTHROPY ROUNDTABLE **Employer identification number**

		instructions))							4	
(i) Nam suppor organiza	rted	tion organization organization in to col (i) listed in in lines 1 - 9 above or IRC section (see		(v) Did you notify the organization in col (i) of your support?		n organization in		mon	nount of etary port	
h	Provide the f	ollowing information abo	out the support	ed organiza	tion(s)					
	• •	member of a person des ontrolled entity of a pe	• •		above?				(iii)	
	and (III) below	v, the governing body o	f the supported	lorganızatı	on?			110	y(i)	
f g	check this bo Since Augus following pers (i) A person	: 17, 2006, has the org sons? who directly or indirect	anızatıon acce ly controls, eıtl	pted any gi	ft or contributi	on from an	y of the)	Yes	No No
е Г		this box, I certify that t undation managers and a)(2)								
11 F	one or more p	on organized and opera publicly supported orga describes the type of si e I b Type II	nızatıons desci upporting orgar	ribed in sec nization and	tion 509(a)(1 complete line) or sectior s 11e thro	509(a)(2) S	See section !	509(a)(3).	.Check
LO $ egthappy$	An organizat	on organized and opera	ated exclusivel	y to test for	public safety	See sectio	on 509(a)(4).			
		he organization after Ju						can, nom b		
		om gross investment ir		· =						
9		on that normally received activities related to it:								SS
8	A community	trust described in sect	tion 170(b)(1)((A)(vi) (Co			hb.a.a	- h - w - h		
7 🔽	•	on that normally receiv section 170(b)(1)(A)(v			s support from	a governm	ental unit or	from the gen	eral public	С
6 _		te, or local governmen								
	section 170()(1)(A)(iv). (Complet	e Part II)							
5		on operated for the ber	nefit of a colleg	e or univers	ity owned or o	perated by	a governmer	ntal unit des	cribed in	
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
2		cribed in section 170(b				470(1)(4				
1 _		nvention of churches, o				ection 170	(b)(1)(A)(i).			
he organi:		private foundation beca								
Part I								instructions	· .	

Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total

	ection A. Public Support							
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	5,146,358	5,735,588	7,190,865	6,211,321	5,105,665	29,389,797	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	5,146,358	5,735,588	7,190,865	6,211,321	5,105,665	29,389,797	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included						5,085,775	
	on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4						24,304,022	
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
7	A mounts from line 4	5,146,358	5,735,588	7,190,865	6,211,321	5,105,665	29,389,797	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	16,771	131,482	163,870	181,094	215,061	708,278	
9	sources Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	15,867	10,924	7,974	12,471	7,925	55,161	
11	Total support (Add lines 7 through 10)						30,153,236	
12	Gross receipts from related activition	es, etc (see instr	uctions)			12	1,943,816	
13	First five years. If the Form 990 is this box and stop here	<u> </u>	<u> </u>		•		·	
	ection C. Computation of Pub							
14	Public support percentage for 2013			11, column (f))		14 80 600 %		
15	Public support percentage for 2012	•	•			15 80 690		
	and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14							
ь	is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly						orted ▶┌	
18	supported organization Private foundation. If the organizations				-	▶ □		

instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support		_	_			
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
2	merchandise sold or services performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
3	purpose Gross receipts from activities that						
3	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its						
5	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
	ction B. Total Support						ı
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
IVa	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
4.2	business is regularly carried on Other income Do not include						
12	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for check this box and stop here	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	1 501(c)(3) orgai	nization, ►厂
Se	ction C. Computation of Publi						
15	Public support percentage for 2013	(line 8, column (f) divided by line	13, column (f))		15	
16	Public support percentage from 2012	2 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 2				ın (f))	17	
18	Investment income percentage from	2012 Schedule	A , Part III . line 1	.7		18	
	33 1/3% support tests—2013. If the				line 15 is more t		line 17 is not
±3a	more than 33 1/3%, check this box ar	nd stop here. Th	e organization qu	alıfıes as a publi	cly supported org	anızatıon	▶ ┌
b	33 1/3% support tests—2012. If the	organization did	not check a box	on line 14 or line	19a, and line 16	ıs more than 33	1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions							
Facts And Circumstances Test							
Return Reference Explanation							
		Schodulo A / Form 000 o	000 E7) 201				

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493122009314

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• 9	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III	-			
	me of the organization E PHILANTHROPY ROUNDTABLE			Employ	yer iden	tification number
1111	THEATTROTT ROOMSTABLE			13-29	43020	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a section	n 527	organization.
1	Provide a description of the ord	ganızatıon's dırect and ındırect politic	al campaign activ	vities in Part IV		
2	Political expenditures	·			▶	\$
3	V olunteer hours					T .
		ganization is exempt under s)(3).		
1	·	e tax incurred by the organization und			•	\$
2		e tax incurred by organization manage		4955	Þ	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?			☐ Yes ☐ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par		<u>ganization is exempt under s</u>				1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exempt	t function activities	s F	\$
2	Enter the amount of the filing o exempt function activities	rganızatıon's funds contributed to oth	ner organizations	for section 527	٠	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	ind on Form 1120)-POL, line 17b	►	\$
4	Did the filing organization file F	Form 1120-POL for this year?				┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	amount paid fror rectly delivered t	n the filing organiz o a separate politi	atıon's 1 cal orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid filing organizat funds If none, er	ion's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	42,000		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1i	o)	42,000	
d	Other exempt purpose expenditures		6,157,039	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	6,199,039	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	459,952	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	114,988	
h	Subtract line 1g from line 1a If zero or less, ent	er - O -	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1ı, did the organization file Form 472	0 reporting	⊤Yes ⊏ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expe	nditures During 4	l-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	425,824	448,035	453,991	459,952	1,787,802
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,681,703
c	Total lobbying expenditures	24,400	15,900	15,000	42,000	97,300
d	Grassroots nontaxable amount	106,456	112,009	113,498	114,988	446,951
е 	Grassroots ceiling amount (150% of line 2d, column (e))					670,427
f	Grassroots lobbying expenditures	24,400	15,900	15,000	42,000	97,300

	filed Form 5768 (election under section 501(h)).				<i>.</i>
For e activ		gh 11 below, provide in Part IV a detailed description of the lobbying	Yes	No		(b) nount
activ	icy.		165	NO	AII	ilouiit
1		anization attempt to influence foreign, national, state or local t to influence public opinion on a legislative matter or referendum,	ı			
a L		L common or the common or				
b	Media advertisements?	de compensation in expenses reported on lines 1c through 1i)?				
c C		ortho public?				
d	Mailings to members, legislators	· · · · · · · · · · · · · · · · · · ·				
e	Publications, or published or broad	<u> </u>				
f	Grants to other organizations for	_				
g		heir staffs, government officials, or a legislative body?				
h		rs, conventions, speeches, lectures, or any similar means?				
!	Other activities?					
j	Total Add lines 1c through 1i					
2a		the organization to be not described in section 501(c)(3)?				
Ь		tax incurred under section 4912				
c		tax incurred by organization managers under section 4912	i			
d		a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	rganization is exempt under section 501(c)(4), section 5	01(C))(5), c	or sec	ction
	301(0)(0).				Τ,	res N
1	Were substantially all (90% or m	nore) dues received nondeductible by members?		Г	1	
2		n-house lobbying expenditures of \$2,000 or less?			2	
3	_	ry over lobbying and political expenditures from the prior year?		F	3	
Par		rganization is exempt under section $501(c)(4)$, section 5	501(c)(5), c	or sec	tion
	501(c)(6) and if e	either (a) BOTH Part III-A, lines 1 and 2, are answered "				
	line 3, is answere					
1	Dues, assessments and similar		1			
2	expenses for which the section 5	bbying and political expenditures (do not include amounts of political 527(f) tax was paid).				
a	Current year		2a			
Ь	Carryover from last year		2b			
С	Total		2c			
3		ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		runt on line 2c exceeds the amount on line 3, what portion of the excess arryover to the reasonable estimate of nondeductible lobbying and	4			
5		political expenditures (see instructions)	5			
	art IV Supplemental Inf					
Pro		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	p list),	Part II	-A, lın	e 2, an
<u> </u>	Return Reference	Explanation				
DΛP	T II-A, LINE 1B	DURING 2013, THE ORGANIZATION INCURRED TOTAL SELF-DEFE	NSEIC	BRVIN	IG E Y P	FNCF
~ ı,	I II A, LINE ID	IN THE AMOUNT OF \$262 800 OF WHICH \$220 800 WAS DIRECT IN				

Return Reference	Explanation
PART II-A, LINE 1B	DURING 2013, THE ORGANIZATION INCURRED TOTAL SELF-DEFENSE LOBBYING EXPENSES IN THE AMOUNT OF \$262,800 OF WHICH \$220,800 WAS DIRECT LOBBYING AND \$42,000 WAS GRASSROOTS LOBBYING SELF-DEFENSE DIRECT LOBBYING EXPENSES ARE NOT CONSIDERED LOBBYING EXPENDITURES AND THEY ARE NOT SHOWN ON PART II-A, LINE 1B
-	

201104410 0 (101111 330 01 330 12) 2013		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

DLN: 93493122009314

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

ema	l Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspect	ior)
	me of the organi			Emp	oloyer identifica	tion numbe	r	
ιHΕ	E PHILANTHROPY RO	JUND I ABLE		13-	2943020			
Pa		izations Maintaining Donor Adv				. Complet	e ıf	the
	organiz	zation answered "Yes" to Form 990	i i	1	(h) Funda and a	. 4 1		
	Total number a	t and of year	(a) Donor advised funds		(b) Funds and o	otner accou	ints	
		tributions to (during year)						
	55 5	nts from (during year)						
		ue at end of year						
		zation inform all donors and donor adviso	rs in writing that the assets held in dor	nor adv	ised			
		organization's property, subject to the or				☐ Yes	Г	No
	used only for c	zation inform all grantees, donors, and de haritable purposes and not for the benef				-	_	
_		ermissible private benefit?	Also a construction of the second different to		000 D TV	│ Yes	<u> </u>	No
ė]	•	rvation Easements. Complete if		o For	m 990, Part IV	, line 7.		
		conservation easements held by the org on of land for public use (e g , recreation		histor	rically important	land area		
		of natural habitat	Preservation of a					
	Preservation	on of open space						
	Complete lines	s 2a through 2d If the organization held a he last day of the tax year	qualified conservation contribution in	the for	n of a conservat	ion		
	casement on the	ne last day of the tax year			Held at the	End of the	Yea	ır
a	Total number o	of conservation easements		2a				
b	Total acreage	restricted by conservation easements		2b				
С	Number of con	servation easements on a certified histo	ric structure included in (a)	2c				
t		servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d				
	Number of con	servation easements modified, transferr	ed, released, extinguished, or terminate	ed by t	he organization	during		
	the tax year 🛌							
	Number of stat	tes where property subject to conservati	on easement is located -					
	Does the organ	nization have a written policy regarding t f the conservation easements it holds?		—— dlıng o	f violations, and	Г Yes	Г	No
		iteer hours devoted to monitoring, inspe	cting, and enforcing conservation easei	ments	during the year	, 163	'	110
	-							
	A mount of exp	enses incurred in monitoring, inspecting	, and enforcing conservation easement	s durın	g the year			
	► \$							
	Does each con and section 17	nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı)	☐ Yes	Γ	No
	balance sheet,	escribe how the organization reports cor , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financia					
a li	t IIII Organ	izations Maintaining Collection ete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar <i>i</i>	Assets.		
a	works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse	ts held for public exhibition, education,	or res	earch in furthera			
b	If the organiza works of art, hi	de, in Part XIII, the text of the footnote t tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	staten	nent and balance		ıc	
	(i) Revenues i	ncluded in Form 990, Part VIII, line 1			- \$			
		luded in Form 990, Part X						
	If the organiza	tion received or held works of art, histor ints required to be reported under SFAS						
3	_	uded in Form 990, Part VIII, line 1			► ⊄			
ь					· ·			
-	ASSETS INCIUDE	ed in Form 990, Part X			F- \$			

Par	411 Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	<u>tori</u>	cal Tre	<u>easur</u>	es, or C	<u> the</u>	r Similar <i>i</i>	<u> Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of th	ne follo	wing that	are a	significant u	ise of	ıts	
а	Public exhibition		d	Γ	Loan o	rexcha	ange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	v the	y furthei	the or	ganızatıor	n's ex	empt purpos	e in		
5	During the year, did the organization solicit of								ılar	_		_
	assets to be sold to raise funds rather than t		•						". =		Yes	No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	ea "Y	es" to Form	1 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	for c	ontribut	ions or	other ass	sets r	not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving t	able		_					
										A mou	nt	
С	Beginning balance							1c				
d	Additions during the year						L	1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has b	een pr	ovided in	Part :	XIII			Γ
Pa	rt V Endowment Funds. Complete											
	·	(a)Current year	(b))Prior	year	b (c) Tw	o years bac	k (d)	Three years bad	k (e)	Four ye	ars back
1a	Beginning of year balance							_				
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships							1				
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curi	rent year end baland	e (lın	e 1g	, columr	n (a)) he	eld as					
а	Board designated or quasi-endowment F											
ь	Permanent endowment -											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
За	Are there endowment funds not in the posses		ation	that	are held	and ad	lmınıstere	d for	the			
	organization by	J									Yes	No
	(i) unrelated organizations								<u> </u>	Ba(i)		
	(ii) related organizations								🔼	Ba(ii)		
	If "Yes" to 3a(II), are the related organizatio							•		3b		
4	Describe in Part XIII the intended uses of the						anad War	-! to	Forms 000	Dowl	TV/ los	
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		ne o	ryar	nzation	answe	ereu res	5 10	FORIII 990,	Рагі	IV, III	ie
	Description of property				a) Cost or		(b)Cost or basis (ot		(c) Accumu depreciat		(d) B	ook value
	Land			+							1	
	Buildings										1	
	Leasehold improvements			\vdash								
	Equipment						:	12,663		4,232		8,431
	0 th a :-							,		,		,
	I. Add lines 1a through 1e (Column (d) must e	<u> </u>										

Part VII	See Form 990, Part X, line 12.	ipiete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
	(a) Description of security or category	(b)Book value	(c) Method of valuation
(1)[(including name of security)		Cost or end-of-year market value
	al derivatives -held equity interests		
Other	Tiefu equity interests		
	(1) - 1 - 15 - 000 D 1 × 1 (0) (- 10)	<u> </u>	
	m (2) mast oqual rollin sto) rait ily cor (2) mis 22 /		
Part VIII	See Form 990, Part X, line 13.	implete il tile organizatio	if allswered fes to Form 990, Part IV, line IIC.
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Total. (Colur	nn (b) must equal Form 990, Part X, col (B) line 13)	•	
Part IX		answered 'Yes' to Form 990), Part IV, line 11d See Form 990, Part X, line 15
	(a) Descrip	otion	(b) Book value
	40		
Part X	(mn (b) must equal Form 990, Part X, col.(B) line 15		
Part X	Form 990, Part X, line 25.	mzation answered Yes' t	o Form 990, Part IV, line 11e or 11f. See
1	(a) Description of liability	(b) Book value	
Federal inc	ome taxes		
DEFERRED		60,875	
Total. (Colur	nn (b) must equal Form 990, Part X, col (B) line 25)	60,875	
		·	

Par		evenue per Audited Financial Statemo Jered 'Yes' to Form 990, Part IV, line 12a.	ents With Revenue p	er Re	eturn Complete if
1		r support per audited financial statements		1	6,300,251
2	A mounts included on line 1 bi	t not on Form 990, Part VIII, line 12			
а	Net unrealized gains on inves	ments 2a	557,479		
b	Donated services and use of t	acılıtıes			
c	Recoveries of prior year grant	5			
d	Other (Describe in Part XIII				
e	Add lines 2a through 2d .			2e	557,479
3	Subtract line 2e from line 1 .			3	5,742,772
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1			
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII	4b			
С	Add lines 4a and 4b	.		4c	0
5	Total revenue Add lines 3 an	4c. (This must equal Form 990, Part I, line 12)		5	5,742,772
Part		xpenses per Audited Financial Statem swered 'Yes' to Form 990, Part IV, line 12a		per	Return. Complete
1	Total expenses and losses pe	audited financial statements		1	6,419,839
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25			
а	Donated services and use of f	acilities	a		
b	Prior year adjustments	2	b		
C	Otherlosses		с		
d	Other (Describe in Part XIII)		d		
e	Add lines 2a through 2d	.		2e	0
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	6,419,839
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:			
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b 4	a		
b	Other (Describe in Part XIII)	4	b		
c	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, line 18)	5	6,419,839
Part	XIIII Supplemental In	ormation			
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4 lines 2d and 4b, and Part XII, lines 2d and 4b. A			le any additional
	Return Reference	Explanation			
PART	X, LINE 2	THE ORGANIZATION'S INCOME TAX RETUR BY FEDERAL AND STATE AUTHORITIES THE ACTIVITIES THAT WOULD JEOPARDIZE ITS THE FISCAL YEARS ENDED 2010 THROUGH AND STATE AUTHORITIES	E ORGANIZATION IS NO TAX-EXEMPT STATUS	OT AW THE T	ARE OF ANY AX RETURNS FOR

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

THE PHILANTHROPY ROUNDTABLE

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493122009314

2013

Open to Public Inspection

Employer identification number

13-2943020

		Governments and recipient that receive					d "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) RAMON C CORTINES SCHOOL OF VISUAL AND PERFORMING ARTS 450 N GRAND AVENUE LOS ANGELES, CA 90012	95-6001908	501(C)3	250,000				THE PHILANTHROPY ROUNTABLE ADMINISTERS THE WILLIAM E SIMON PRIZE, WHICH PROVIDES UP TO A \$250,000 PRIZE PAYABLE TO THE CHARITY OR CHARITIES OF THE PRIZE RECIPIENT'S CHOICE

Enter total number of other organizations listed in the line 1 table . . .

I	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, I	Part IV, line 22
_	Part III can be duplicated if additional space is needed.	•

(a)Type of grant or assistar	nce	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental:	Informa	tion. Provide the inf	ormation required in P	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.
Return Reference	Explana	ntion				
PART I, LINE 2	THE PH	ILANTHROPY ROUND	TABLE ADMINISTERS TH	HE WILLIAM E SIMON PR	IZE, WHICH PROVIDES A \$2	250,000 PRIZE PAYABLE TO THE

CHARITY OR CHARITIES OF THE PRIZE RECIPIENT'S CHOICE

DLN: 93493122009314

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization THE PHILANTHROPY ROUNDTABLE **Employer identification number**

13-2943020

Pa	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided an				
	990, Part VII, Section A, line 1a Complete Part III to prov				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organizati				
	reimbursement or provision of all of the expenses described	above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimburs				
	directors, trustees, officers, including the CEO/Executive D	frector, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization organization's CEO/Executive Director Check all that apply used by a related organization to establish compensation of	y Do not check any boxes for methods			
	Compensation committee	Written employment contract			
	☐ Independent compensation consultant	Compensation survey or study			
		Approval by the board or compensation committee			
		.,			
4	During the year, did any person listed in Form 990, Part VII or a related organization	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control paymen	t?	4a		No
b	Participate in, or receive payment from, a supplemental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based col	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a compensation contingent on the revenues of	, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		No
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a compensation contingent on the net earnings of	, did the organization pay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		No
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a payments not described in lines 5 and 6? If "Yes," describe		7		No
8	Were any amounts reported in Form 990, Part VII, paid or a				
	subject to the initial contract exception described in Regula				
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebutta	able presumption procedure described in Regulations			
	section 53 4958-6(c)?		9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)ADAM MEYERSON PRESIDENT	(i) (ii)		0	0	40,050	20,219	327,269	0 0	
(2)JOHN PAUL DE GANCE CHIEF OPERATING OFFICER	(i) (ii)	178,231	0	0	0	17,648	195,879	0	
(3)KARL ZINSMEISTER VICE PRESIDENT OF PUBLICATIONS	(i) (ii)		0	0	29,531 0	20,219	274,750	0	
(4)JOANNE FLORINO SENIOR VICE PRESIDENT OF PUBLIC POLI	(i) (ii)	160,663	500 0	0	0	10,298	171,461 0 0	0	
(5)JO KWONG DIRECTOR OF ECONOMIC OPPORTUNITY	(i) (ii)	119,000	2,500	0	18,750 0	20,219	160,469	0	

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493122009314

OMB No 1545-0047

2013

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization THE PHILANTHROPY ROUNDTABLE

Employer identification number

13-2943020

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE BYLAWS WERE AMMENDED DURING THE YEAR TO CHANGE THE MAXIMUM NUMBER OF YEARS A CHAIRMAN OF THE BOARD CAN SERVE FROM 3 YEARS TO 4 YEARS
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM MANAGEMENT REVIEWS THE DRAFT RETURN PRIOR TO THE FILING WITH THE INTERNAL REVENUE SERVICE
FORM 990, PART VI, SECTION B, LINE 12C	THE PHILANTHROPY ROUNDTABLE AND ALL DIRECTORS, OFFICERS AND STAFF SHALL AVOID ANY CONFLICT BETWEEN THEIR RESPECTIVE PERSONAL, PROFESSIONAL, OR BUSINESS INTERESTS AND THE INTERESTS OF THE ORGANIZATION, IN ANY AND ALL ACTIONS TAKEN BY THEM ON BEHALF OF THE PHILANTHROPY ROUNDTABLE IN THEIR RESPECTIVE CAPACITIES TO SERVE LOYALLY, EACH BOARD MEMBER AND EMPLOYEE SHALL IDENTIFY AND BE CONSCIOUS OF CONFLICTS BETWEEN PERSONAL INTERESTS AND ACT WITH CANDOR AND CARE IN DISCLOSING AND RESOLVING CONFLICTS EACH BOARD MEMBER AND EMPLOYEE SHALL ACKNOWLEDGE AND DISCHARGE HIS OR HER DUTY TO DISCLOSE ACTUAL AND POTENTIAL CONFLICTS OF INTEREST IF ANY OFFICER, DIRECTOR OR STAFF MEMBER HAS ANY DIRECT OR INDIRECT INTEREST OR RELATIONSHIP WITH ANY INDIVIDUAL OR ORGANIZATION THAT PROPOSES TO ENTER INTO ANY TRANSACTION WITH THE ROUNDTABLE, THAT PERSON SHALL GIVE NOTICE OF SUCH INTEREST OR RELATIONSHIP AND SHALL THEREAFTER REFRAIN THEMSELVES FROM DISCUSSING OR VOTING ON THE PARTICULAR TRANSACTION IN WHICH HE HAS AN INTEREST, OR OTHERWISE ATTEMPTING TO EXERT ANY INFLUENCE ON THE ROUNDTABLE TO AFFECT A DECISION TO PARTICIPATE OR NOT PARTICIPATE IN SUCH TRANSACTION THE BOARD WILL MAKE DECISIONS, AS REQUIRED, TO AVOID ACTUAL CONFLICT OF INTEREST. THE BOARD WILL ALSO REVIEW AND REVISE THIS POLICY AS NEEDED
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD DETERMINES THE COMPENSATION OF THE PRESIDENT ANNUALLY USING THE FORM 990 OF SIMILAR ORGANIZATIONS THIS PROCESS WAS LAST PERFORMED IN 2013
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
FORM 990, PART IX, LINE 11G	PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 571,967 MANAGEMENT AND GENERAL EXPENSES 77,928 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 649,895
FORM 990, PART XI, LINE 2C	THE OVERSIGHT PROCESS AND SELECTION PROCESS HAVE NOT CHANGED